

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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NEW HAMPSHIRE
DEPARTMENT OF STATE

I. Name	of Lobbyist(s) _	Bryan K. Gould				
II. Name	of lobbyist's pa	rtnership, firm or corp	oration, if an	y:		
		Cleveland,, Waters a	nd Bass, P.A.			
	(Name o	f partnership, firm or corpo	ration)			
	Two Capital	Plaza, 5th Floor, P.O. B	ox 1137, Con	cord, NH 03302-11	37	
Business A	Address: (Street)		Town/City)		ate)	(Zip Code)
(603)	224-7761	(603)_	224-6457	e-mail _	gouldb@cwbp	a.com
	(Telephone)	_	(Fax)			
reportab	ole expense trans	rs: (Choose one – file se sactions which are not a	ittributable to	any one client).		
U Allre	eportable transact	ions occurring in the mo	mus prior to a	ie reporting date re	lative to the lon	owing enem.
	Pharmac	eutical Research and I	Manufacturer	s of America		
OR	(F	ull Name of Client as it ap	pears on the Lob	byist Registration Fo	mı)	
☐ All re	portable transact	ions by the lobbyist (inc r client.	uding the lobb	oyist's family), or th	ne lobbying firm	listed below which are
IV Date	of Report /	\pril 25, 2018		July 25, 20	18 🗆	
Reports c	•	from date of registration to	3/31/18	activity from 4/1/1		
		October 31, 2018 ivity from 7/1/18 to 9/30/18		January 30 activity from 10/1/		
If this bo	re have been no ax is checked, con 1, NH 03301.	o fees received and no applete just this form and	reportable submit it to the	transactions made Secretary of State	de since the la 's Office, State	sst report. House, Room 204,
VI. Chec	ck if additional :	reports are attached:				
		fees or made expenditure	es, you must fi	le Addendum A– l	Fees and Expens	ses
Expense	Reimbursement	onorarium or reimbursed				
☐ If yo	ou, your firm, or	your family has made po	litical contribu	itions, you must file	e Addendum C	 Political Contribution
Swarn	Statement/Affirm	nation by Lobbyist				
I have re	ad RSA 15, RSA	15-B, RSA 14-C and R of my knowledge and be	SA 664 and he lief.	-		oing information is true
(Signatu	ure of lobbyist)	<u> </u>		5-9	(Date)	
Brya (Print N	n K. Gould lame of lobbyist)					

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Bryan K. Gould	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Cleveland, Waters and Bass, P.A.	
(Name of partnership, firm or corporation)	
III. Name of Client Pharmaceutical Research and Manufacturers of Am	nerica Date 04/25/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified at to lobbying, including fees for services such as public advocacy, governincluding research, monitoring legislation, and related legal work. Treduced by any expenses:	nment relations, or public relations servic
a) Total of all fees received in this reporting period	a) \$12,450.00
b) Total of all fees received this calendar year, prior to this reporting pe (This should equal the total of all prior monthly reports for this caler	
c) Total of all fees received to date (Add lines a and b)	c) \$12,450.00
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required fees. Separate reports are to be filed for expenditures made relative to the lobbyist(s)/firm that are unrelated to any one client a separate re Expenses are to be reported in one of three categories of expenses: during the reporting period for salaries, benefits, support staff, and off individual expenses where the expenditure was of \$25.00 or less (for elunch where the cost was \$25.00 or less, purchase of a pen with a value being lobbied, purchase of a ceremonial object given to a person being (c) an itemized statement of each individual expenditure made during the any purpose not covered by (a) (for example: purchase of a meal wit ceremonial object to be given to the subject of lobbying with a value restaurant expenses for a legislative reception). Expenses for honora contributions will be reported on separate addendums and should not be	each client and if expenditures are made leport may be filed for the lobbyist(s)/firm (a) the aggregate total of all expenses partice expenses; (b) the aggregate total of a example: meals purchased during a busine of less than \$10 that is given to the persolobbied with a value of \$25.00 or less); as is reporting period of greater than \$25.00 th value of greater than \$25, but not greater than \$35 triums, expense reimbursement, or politic
 a) Total aggregate expenses for this reporting period for salaries, benefit support staff, and office expenses, related directly or indirectly to lobbyi 	ng. a) \$
b) Total aggregate of expenditures during this reporting period, not repoin a), of \$25 or less.	b) \$0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$50.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	50.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	50.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees	during this reporting
Paid to:	Amount:	
State of New Hampshire	\$	50.00
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the fi	oregoing information
is true and complete to the best of my knowledge and belief.	ii iiiai iiie ii	oregoing information
Busuk Gould (Signarure of lobbyist)	5-	9 - 18 Date)
Bryan K. Gould (Print Name of lobbyist)		